PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or Docket Number

42390-1910984

(Column 1) (Column 2)								SMALL ENTITY		OTHER THAN			
TOTAL CLAIMS			22		(Colu		, ,	YPE [OR •	SMALL		
							.	RATE	FEE	1	RATE	FEE	
FOR			NUMBER	FILED	NUMB	BER EXTRA	. [BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 min	us 20=	*	3		X\$ 9=		OR	X\$18=	=400	0
INDEPENDENT CLAIMS			A mi	nus 3 =	• 1			X40=			X80=		0
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				` 			OR	7.56-	80,0	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+135=		OR	+270=		
								TOTAL		OR	TOTAL	844"	00
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1) CLAIMS		(Colur		(Column 3)) r	SMALL		OR 1 1	SMALL		
E	16 A 19 0 1	REMAINING AFTER	34-3	NUMBER PREVIOUS		PRESENT EXTRA	RATE	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT		AMENDMENT		PAID	FOR	- LANIA	┞		FEE			FEE /	
	Total	· 22	Minus	/	<u> </u>	=		X\$(9=		OR	X\$18=		
	Independent	* 5	Minus) fr. (_	14	1=		X40=		OR	X80=		
<u> </u>	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDENT	CLAIM		1	.105	/	1	. 070		Best
							L	+135= TOTAL	 	OR	+270=	/_/	S
							Α	DDIT. FEE	<u></u>	OR	TOTAL ADDIT. FEE		>
		(Column 1) CLAIMS		(Colur		(Column 3)	. –						à
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	BER	PRESENT EXTRA	RA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	景
						EXIDA		, ., .	FEE			FEE	8
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		Available
AME.	Independent	*	Minus	***		=		X40=			X80=	-	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		l ├	 		OR			Cop
							L	+135=		OR	+270=		b
							Αſ	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)	, , , , , , , , , , , , , , , , , , ,	(Colum		(Column 3)							
ပ	· · · · · · · · · · · · · · · ·	CLAIMS REMAINING		HIGHE NUMB	BER	PRESENT			ADDI-			ADDI-	
EN		AFTER AMENDMENT		PREVIO PAID I		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
ğ	Total	*	Minus	**		=		X\$ 9=			X\$18=		
AMENDMENT	Independent	*	Minus	***	<u> </u>	=	┢			OR			
┖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X40=		OR	X80=		
								+135=		OR	+270=		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 							• -	TOTAL DIT. FEE		OR ,	TOTAL		
***	f the "Highest Nu	mber Previously Pa ber Previously Pai	aid For" IN THIS	S SPACE is	s less tha	n 3. enter "3."	AL	· -		,	ADDIT. FEE l umn 1.		